Renice Cox, Associate
Product Manager
Official - Title

	(1)	(2)	(3)
	Coverage	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
,	Commercial		
2.	Automobile Physical Damage Private Passenger		
	Commercial		· · · · · · · · · · · · · · · · · · ·
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	271,020	- 2.7%
10.	Extended Coverage		
11.	Inland Marine		
	Homeowners		
١٧.			
12. 13.	Commercial Multi-Peril		
13.	Commercial Multi-Peril Crop Hail		
13. 14.	Crop Hail Other		
13. 14. 15.	Other Line of Insurance		
3. 4. 5.  Des f Not	Crop Hail Other Line of Insurance  dling only apply to certain territory (the Applicable  description of filing. (If filing follow purpose of this filing is to adoption of the state of th	erritories) or certain classes? If so, specify: s rates of an advisory organization, specify of the following Insurance Services C Revision Designation Number CF-20	Office, Inc. (ISO)
13. 14. 15. 15. 16. 17. 17. 18. 19. 19. 19. 19. 19. 19. 19. 19. 19. 19	Crop Hail Other Line of Insurance  lling only apply to certain territory (the Applicable  description of filing. (If filing follow purpose of this filing is to adopt mercial Fire and Allied Lines	s rates of an advisory organization, specify of the following Insurance Services C Revision Designation Number CF-20	Office, Inc. (ISO)
13. 14. 15. 16 ooes f Not The Com	Crop Hail Other Line of Insurance  lling only apply to certain territory (the Applicable  description of filing. (If filing follow purpose of this filing is to adopte and Allied Lines  liguisted to reflect all prior rate change	s rates of an advisory organization, specify of the following Insurance Services O Revision Designation Number CF-20	Office, Inc. (ISO)
id.	Crop Hail Other Line of Insurance  lling only apply to certain territory (the Applicable  description of filing. (If filing follow purpose of this filing is to adopte and Allied Lines  ligusted to reflect all prior rate change ange in Company's premium level were as a second company as a secon	s rates of an advisory organization, specify of the following Insurance Services O Revision Designation Number CF-20	Office, Inc. (ISO)
id.	Crop Hail Other Line of Insurance  lling only apply to certain territory (the Applicable  description of filing. (If filing follow purpose of this filing is to adopte and Allied Lines  liguisted to reflect all prior rate change	s rates of an advisory organization, specify of the following Insurance Services O Revision Designation Number CF-20	Office, Inc. (ISO)
13. 14. 15.  15.  16.  17.  18.  19.  19.  19.  19.  19.  19.  19	Crop Hail Other Line of Insurance  lling only apply to certain territory (the Applicable  description of filing. (If filing follow purpose of this filing is to adopte and Allied Lines  ligusted to reflect all prior rate change ange in Company's premium level were as a second company as a secon	s rates of an advisory organization, specify of the following Insurance Services O Revision Designation Number CF-20	Office, Inc. (ISO)
3. 4. 5.  Not  Frief Com  * Acceptable Com  * Com  * Acceptable Co	Crop Hail Other Line of Insurance  lling only apply to certain territory (the Applicable  description of filing. (If filing follow purpose of this filing is to adopte and Allied Lines  ligusted to reflect all prior rate change ange in Company's premium level were as a second company as a secon	s rates of an advisory organization, specify of of the following Insurance Services C Revision Designation Number CF-20 es.	Office, Inc. (ISO)
id.	Crop Hail Other Line of Insurance  lling only apply to certain territory (the Applicable  description of filing. (If filing follow purpose of this filing is to adopte and Allied Lines  ligusted to reflect all prior rate change ange in Company's premium level were as a second company as a secon	s rates of an advisory organization, specify of of the following Insurance Services C Revision Designation Number CF-20 es.	Office, Inc. (ISO) 011-RLA1 American Insurance

(	Change in Company's premium or rate	level produced by rate revision effective	04/01/2012
	(1)	(2)	(3)
	Coverage	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
•	Commercial		
3.	Liability Other Than Auto		·
4.	Burglary and Theft	•	
5.	Glass		1,000
6. 7.	Fidelity Surety		
7. 8.	Boiler and Machinery		
9.	Fire	1 496 059	- 2.7%
		1,486,958	22.770
10. 11.	Extended Coverage Inland Marine		
11. 12.	Homeowners		
12. 13.	Commercial Multi-Peril		
13. 14.	Crop Hail		
15.	Other		
13.	Line of Insurance		
Not	Applicable	rritories) or certain classes? If so, specify:	
The	purpose of this filing is to adop	rates of an advisory organization, specify t the following Insurance Services ( Revision Designation Number CF-2	Office, Inc. (ISO)
** Cl	djusted to reflect all prior rate changes nange in Company's premium level wl sult from application of new rates.		
			Property & Casualty cance-Company — —
			Name of Company

Renice Cox, Associate Product Manager Official - Title

## FORM (RF-3)

## **SUMMARY SHEET**

Change in Company's premium o	r rate level produced by rate revision
effective April 1, 2012	•

<u>-</u>	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
	Automobile Liability Private	Volume (minjoro)	- Change (101)
•	Passenger		
	Commercial		
	Automobile Physical Damag		
	Private Passenger		•
	Commercial		
	Liability Other Than Auto		
	Burglary and Theft		
	Glass		
	Fidelity		
	Surety		
	Boiler and Machinery		
	Fire	00.000	2.7
	·	99,069	-2.7
	Extended Coverage Inland Marine		
	Homeowners Commercial Multi-Peril		
'. '.			
	Crop Hail		
•	Other Life of Insurance	······	**************************************
	Life of insurance		
	Does filing only apply to certa	in territory (territories) o	r certain
	Classes? If so.	, (,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	specify: No		
	Brief description of filing. (If f	iling follows rates of an a	advisory
	Organization, specify	<b>9</b>	,
	organization):	Adopt ISO's revised loss	costs
	*Adjusted to reflect all prior ra		H. C
	**Change in Company's prem	ium level which will resu	uit from application of new
	rates.		
		AXA Insurance Co	
		N/a	ime of Company

Name of Company Linda Gross, Assistant Vice President

Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire \$38,167 9.7%  Extended Coverage 1. Inland Marine 2. Homeowners 3. Commercial Multi-Peril 4. Crop Hail 5. Other Line of Insurance  Description of filing. (If filing follows rates of an advisory organization, specify organization): Revised Loss Cost Multiplier.  Adjust to reflect all prior rate changes.		Change in Company's premium or rate le	evel produced by rate revision effecti	ve1/1/12
Automobile Liability Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire \$38,167 9.7%  D. Extended Coverage 1. Inland Marine 2. Homeowners 3. Commercial Multi-Peril 4. Crop Hail 5. Other Line of Insurance  oes filling only apply to certain territory (territories) or certain classes? If so, specify organization): Revised Loss Cost Multiplier.  Adjust to reflect all prior rate changes. Change in Company's premium level which will result from application of new rates.  COLUMBIA MUTUAL INS. CO.		(1)	(2)	(3)
Automobile Liability Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire \$38,167 9.7%  D. Extended Coverage 1. Inland Marine 2. Homeowners 3. Commercial Multi-Peril 4. Crop Hail 5. Other Line of Insurance  coes filing only apply to certain territory (territories) or certain classes? If so, specify organization): Revised Loss Cost Multiplier.  Adjust to reflect all prior rate changes. Change in Company's premium level which will result from application of new rates.  COLUMBIA MUTUAL INS. CO.		•	Annual Premium	Percent
Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire \$38,167 9.7%  D. Extended Coverage Inland Marine Chameowners Commercial Multi-Peril Crop Hail Crop Hail Cother Line of Insurance  Description of filling. (If filing follows rates of an advisory organization, specify organization): Revised Loss Cost Multiplier.  Adjust to reflect all prior rate changes. Change in Company's premium level which will result from application of new rates.  COLUMBIA MUTUAL INS. CO.				
Commercial Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire \$38,167 9.7%  D. Extended Coverage 1. Inland Marine 2. Homeowners 3. Commercial Multi-Peril 4. Crop Hail 5. Other Line of Insurance  oes filling only apply to certain territory (territories) or certain classes? If so, specify: No  rief description of filling. (If filing follows rates of an advisory organization, specify organization): Revised Loss Cost Multiplier.  Adjust to reflect all prior rate changes. Change in Company's premium level which will result from application of new rates.	١.			
Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire 1. Extended Coverage 1. Inland Marine 2. Homeowners 3. Commercial Multi-Peril 4. Crop Hail 5. Other Line of Insurance  Des filling only apply to certain territory (territories) or certain classes? If so, specify:  No  No  Adjust to reflect all prior rate changes. Change in Company's premium level which will result from application of new rates.  COLUMBIA MUTUAL INS. CO.				
Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire \$38,167 9.7%  1. Inland Marine 2. Homeowners 3. Commercial Multi-Peril 4. Crop Hail 5. Other Line of Insurance  Description of filling. (If filling follows rates of an advisory organization, specify organization): Revised Loss Cost Multiplier.  Adjust to reflect all prior rate changes. Change in Company's premium level which will result from application of new rates.  COLUMBIA MUTUAL INS. CO.	,			
Liability Other Than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire S38,167 9.7%  D. Extended Coverage Inland Marine Homeowners Commercial Multi-Peril Corp Hail Cother Line of Insurance  oes filing only apply to certain territory (territories) or certain classes? If so, specify: No  Adjust to reflect all prior rate changes. Change in Company's premium level which will result from application of new rates.  COLUMBIA MUTUAL INS. CO.	2.	Private Passenger		
Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire \$38,167 9.7%  1. Inland Marine 2. Homeowners 3. Commercial Multi-Peril 4. Crop Hail 5. Other Line of Insurance  oes filing only apply to certain territory (territories) or certain classes? If so, specify: No  No  Adjust to reflect all prior rate changes. Change in Company's premium level which will result from application of new rates.  COLUMBIA MUTUAL INS. CO.	3.			
Glass Fidelity Surety Boiler and Machinery Fire \$38,167 9.7%  D. Extended Coverage 1. Inland Marine 2. Homeowners 3. Commercial Multi-Peril 4. Crop Hail 5. Other Line of Insurance  coes filing only apply to certain territory (territories) or certain classes? If so, specify: No  rief description of filing. (If filing follows rates of an advisory organization, specify organization): Revised Loss Cost Multiplier.  Adjust to reflect all prior rate changes. Change in Company's premium level which will result from application of new rates.  COLUMBIA MUTUAL INS. CO.				
Fidelity Surety Boiler and Machinery Fire \$38,167 9.7%  D. Extended Coverage I. Inland Marine 2. Homeowners 3. Commercial Multi-Peril 4. Crop Hail 5. Other Line of Insurance  Does filing only apply to certain territory (territories) or certain classes? If so, specify:  No  rief description of filing. (If filing follows rates of an advisory organization, specify organization): Revised Loss Cost Multiplier.  Adjust to reflect all prior rate changes. Change in Company's premium level which will result from application of new rates.  COLUMBIA MUTUAL INS. CO.	↓. 5.			
Surety Boiler and Machinery Fire \$38,167 9.7%  D. Extended Coverage I. Inland Marine 2. Homeowners 3. Commercial Multi-Peril 4. Crop Hail 5. Other  Line of Insurance  coes filing only apply to certain territory (territories) or certain classes? If so, specify:  No  rief description of filing. (If filing follows rates of an advisory organization, specify organization): Revised Loss Cost Multiplier.  Adjust to reflect all prior rate changes. Change in Company's premium level which will result from application of new rates.  COLUMBIA MUTUAL INS. CO.	). 3.			
Boiler and Machinery Fire \$38,167 9.7%  D. Extended Coverage 1. Inland Marine 2. Homeowners 3. Commercial Multi-Peril 4. Crop Hail 5. Other  Line of Insurance  oes filing only apply to certain territory (territories) or certain classes? If so, specify:  No  nief description of filing. (If filing follows rates of an advisory organization, specify organization): Revised Loss Cost Multiplier.  Adjust to reflect all prior rate changes. Change in Company's premium level which will result from application of new rates.  COLUMBIA MUTUAL INS. CO.	7.	•		
Fire \$38,167 9.7%  D. Extended Coverage 1. Inland Marine 2. Homeowners 3. Commercial Multi-Peril 4. Crop Hail 5. Other	3.			
D. Extended Coverage 1. Inland Marine 2. Homeowners 3. Commercial Multi-Peril 4. Crop Hail 5. Other  Line of Insurance  oes filing only apply to certain territory (territories) or certain classes? If so, specify:  No  rief description of filling. (If filing follows rates of an advisory organization, specify organization):  Revised Loss Cost Multiplier.  Adjust to reflect all prior rate changes. Change in Company's premium level which will result from application of new rates.  COLUMBIA MUTUAL INS. CO.	). ).		\$39.167	9.7%
1. Inland Marine 2. Homeowners 3. Commercial Multi-Peril 4. Crop Hail 5. Other  Line of Insurance  oes filing only apply to certain territory (territories) or certain classes? If so, specify:  No  rief description of filing. (If filing follows rates of an advisory organization, specify organization):  Revised Loss Cost Multiplier.  Adjust to reflect all prior rate changes. Change in Company's premium level which will result from application of new rates.  COLUMBIA MUTUAL INS. CO.				
2. Homeowners 3. Commercial Multi-Peril 4. Crop Hail 5. Other  Line of Insurance  oes filing only apply to certain territory (territories) or certain classes? If so, specify:  No  rief description of filing. (If filing follows rates of an advisory organization, specify organization): Revised Loss Cost Multiplier.  Adjust to reflect all prior rate changes. Change in Company's premium level which will result from application of new rates.  COLUMBIA MUTUAL INS. CO.		<del>-</del>		_
3. Commercial Multi-Peril 4. Crop Hail 5. Other  Line of Insurance  oes filing only apply to certain territory (territories) or certain classes? If so, specify:  No  rief description of filing. (If filing follows rates of an advisory organization, specify organization):  Revised Loss Cost Multiplier.  Adjust to reflect all prior rate changes. Change in Company's premium level which will result from application of new rates.  COLUMBIA MUTUAL INS. CO.				
4. Crop Hail 5. Other  Line of Insurance  oes filing only apply to certain territory (territories) or certain classes? If so, specify:  No  rief description of filing. (If filing follows rates of an advisory organization, specify organization):  Revised Loss Cost Multiplier.  Adjust to reflect all prior rate changes. Change in Company's premium level which will result from application of new rates.  COLUMBIA MUTUAL INS. CO.				
Line of Insurance  oes filing only apply to certain territory (territories) or certain classes? If so, specify: No  nief description of filing. (If filing follows rates of an advisory organization, specify organization): Revised Loss Cost Multiplier.  Adjust to reflect all prior rate changes. Change in Company's premium level which will result from application of new rates.  COLUMBIA MUTUAL INS. CO.				
Line of Insurance  oes filing only apply to certain territory (territories) or certain classes? If so, specify No  rief description of filing. (If filing follows rates of an advisory organization, specify organization):  Revised Loss Cost Multiplier.  Adjust to reflect all prior rate changes. Change in Company's premium level which will result from application of new rates.  COLUMBIA MUTUAL INS. CO.				
oes filing only apply to certain territory (territories) or certain classes? If so, specify:  No  rief description of filing. (If filing follows rates of an advisory organization, specify organization):  Revised Loss Cost Multiplier.  Adjust to reflect all prior rate changes. Change in Company's premium level which will result from application of new rates.  COLUMBIA MUTUAL INS. CO.	J.			
rief description of filing. (If filing follows rates of an advisory organization, specify organization):  Revised Loss Cost Multiplier.  Adjust to reflect all prior rate changes. Change in Company's premium level which will result from application of new rates.  COLUMBIA MUTUAL INS. CO.		Line of insurance		
Adjust to reflect all prior rate changes. Change in Company's premium level which will result from application of new rates.  COLUMBIA MUTUAL INS. CO.	)oe	s filing only apply to certain territory (territo	ories) or certain classes? If so, spec	sify: No
Change in Company's premium level which will result from application of new rates.  COLUMBIA MUTUAL INS. CO.	irie	Pavisad Loss Cost Multiplier	,	<del></del>
Change in Company's premium level which will result from application of new rates.  COLUMBIA MUTUAL INS. CO.				
Change in Company's premium level which will result from application of new rates.  COLUMBIA MUTUAL INS. CO.	_			
Change in Company's premium level which will result from application of new rates.  COLUMBIA MUTUAL INS. CO.				
	*		ich will result from application of new	v rates.
Name of Company			·	OLUMBIA MUTUAL INS. CO.
				Name of Company

Dennis McVay, CPCU
Director, Research & Development
\_\_\_\_Official --Title

Change in Company's premium or rate level produced by rate Revision effective <u>1-15-2012</u>

	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	\$1,083,170	+3.3%
10.	Extended Coverage	Incl	Incl
11.	Inland Marine		
12.	Homeowners		
12.	C 1 N C - 14' D 11		
13.	Commercial Multi-Peril		
	Crop Hail		
13.			
13. 14.	Crop Hail		
13. 14. 15.	Crop Hail Other	territories) or certain classes? If	so, specify:
13. 14. 15.	Crop Hail Other Line of Insurance filing only apply to certain territory (t	territories) or certain classes? If	so, specify:
13. 14. 15. Does <b>App</b>	Crop Hail Other Line of Insurance filing only apply to certain territory (the storage of the storage)		
13. 14. 15. Poes <b>App</b>	Crop Hail Other Line of Insurance filing only apply to certain territory (t	s rates of an advisory Organizati	on, specify organization):
13. 14. 15. loes App	Crop Hail Other Line of Insurance filing only apply to certain territory (the stouch of the stouch o	s rates of an advisory Organizati	on, specify organization):
13. 14. 15. Does <b>App</b>	Crop Hail Other Line of Insurance filing only apply to certain territory (the stouch of the stouch o	s rates of an advisory Organizati	on, specify organization):
13. 14. 15. Does App	Crop Hail Other Line of Insurance filing only apply to certain territory (the stouch of the stouch o	s rates of an advisory Organizati	on, specify organization):
13. 14. 15. Ooes App	Crop Hail Other Line of Insurance filing only apply to certain territory (the stouch of the stouch o	s rates of an advisory Organizati liers and company LCM excep	on, specify organization):
13. 14. 15. Does App	Crop Hail Other Line of Insurance filing only apply to certain territory (the stouth of the stouth o	s rates of an advisory Organizati liers and company LCM excep	on, specify organization): tion pages.
13. 14. 15. 20es App	Crop Hail Other Line of Insurance  filing only apply to certain territory (the stoall classes, all territories  description of filing. (If filing followised our company Loss Cost Multiple)  djusted to reflect all prior rate change	s rates of an advisory Organizati liers and company LCM excep	on, specify organization): tion pages.
13. 14. 15. 20es App	Crop Hail Other Line of Insurance  filing only apply to certain territory (the stoall classes, all territories  description of filing. (If filing followised our company Loss Cost Multiple)  djusted to reflect all prior rate change	s rates of an advisory Organizati liers and company LCM excep	on, specify organization): tion pages.
13. 14. 15. 20es App	Crop Hail Other Line of Insurance  filing only apply to certain territory (the stoall classes, all territories  description of filing. (If filing followised our company Loss Cost Multiple)  djusted to reflect all prior rate change	s rates of an advisory Organizati liers and company LCM excep ss. which will result from application	on, specify organization): tion pages.  of new rates.
13. 14. 15. Does App  Brief Revi	Crop Hail Other Line of Insurance  filing only apply to certain territory (the stoall classes, all territories  description of filing. (If filing followised our company Loss Cost Multiple)  djusted to reflect all prior rate change	s rates of an advisory Organizati liers and company LCM excep es. which will result from application  Continental West	on, specify organization): tion pages.
13. 14. 15. Does App  Brief Revi	Crop Hail Other Line of Insurance  filing only apply to certain territory (the stoall classes, all territories  description of filing. (If filing followised our company Loss Cost Multiple)  djusted to reflect all prior rate change	s rates of an advisory Organizati liers and company LCM excep es. which will result from application  Continental West	on, specify organization): tion pages. of new rates. ern Insurance Company
13. 14. 15. Does Appp  Brief Revi	Crop Hail Other Line of Insurance  filing only apply to certain territory (the stoall classes, all territories  description of filing. (If filing followised our company Loss Cost Multiple)  djusted to reflect all prior rate change	s rates of an advisory Organizati liers and company LCM excep es. Thich will result from application  Continental West Name	on, specify organization): tion pages. of new rates. ern Insurance Company

Change in Company's premium or rate level produced by rate Revision effective  $\underline{01/01/2012}$ 

	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
·· 5.	Glass		
5.	Fidelity	1,0,1,0,0	
7.	Surety		
3.	Boiler and Machinery		
9.	Fire	\$1,083,170	+6.7%
). 0.	Extended Coverage	incl	incl
0. 1.	Inland Marine		
2.	Homeowners		
z. 3.	Commercial Multi-Peril		
۰. 1.	Crop Hail		
٠. 5.	-		
٠.	Line of Insurance		
ll c	filing only apply to certain territory (telasses, all territories (including Fired	e/EMS-Pak Program)	
	ising Company Loss Cost Multiplier	19	on, specify organizations.
	djusted to reflect all prior rate change hange in Company's premium level w		of new rates.
			ern Insurance Company
		Name	of-Company
			Gist- Research Analyst
		Off	icial - Title

Change in Company	's	premium	or	rate	level	produced	by	rate
revision effective	re ·	4/1/2012						

(1)	(2)	(3)
Coverage	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
Coverage	Volume (IIIIIOIB)	change (! oz /
1. Automobile Liability Private Passenger		
Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire	395153	-0.3% - Adopting Specifically- Rated Basic Group I Risks Only
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Does filing only apply to certain If so, specify: N/A	territory (territories) of	c certain classes?
Brief description of filing. (If organization, specify organizatio	n): We intend to adopt o rated risks portion COMMERCIAL FIRE AND	nly the specifically of the ILLINOIS ALLIED LINES ADVISORY T REVISION FURNISHED in ISO Reference
* Adjusted to reflect all prior ** Change in Company's premium le result from application of new	vel which will	
•	Craphia Arta Matual Taga	range Company
	Graphic Arts Mutual Insu Name of Compa	
•	Manie OI Compa	····y
Dian	Howshing - Assistant Vice P	resident & Managing Actuary
	Official - Ti	

(	Change in Company's premium or rate	level produced by rate revision effective	04/01/2012
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	18,330	- 2.7%
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
	A1!1.1 -	ritories) or certain classes? If so, specify:	
The	purpose of this filing is to adopt	rates of an advisory organization, specify of the following Insurance Services C evision Designation Number CF-20	Office, Inc. (ISO)
** Cl	djusted to reflect all prior rate changes. nange in Company's premium level wh sult from application of new rates.		

Insurance Company of North
America

Name of Company

Renice Cox, Associate Product Manager

Form (RF-3)

# ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

3/1/2011 for new business and 4/1/2011 for Change in Company's premium or rate level produced by rate revision effective renewals

	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
11.	Automobile Liability Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire Extended Coverage Inland Marine		
13. 14. 15.	Homeowners Commercial Multi-Peril Crop Hail Other Dwelling and Farm Properties Line of Insurance es filling only apply to certain territory (	\$ 20,705  territories) or certain classes? If so, specify:	5%
Brie		rates of an advisory organization, specify orga	anization):
*Ac	ljusted to reflect all prior rate changes. hange in Company's premium level w	hich will result from application of new rates.	
		MutualAid eXchange Na Lisa Sladek - Senior Complian	me of Company
			Official – Title

•	Change in Company's premium or rat	e level produced by rate revision effect	tive <u>04-01-12</u>
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage Private Passenger	,	
	Commercial		
3.	Liability Other Than Auto	### ### ##############################	
4.	Burglary and Theft		
5.	Glass	****	
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		19941
9.	Fire	1,000	-2.7%
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		•
oes i No	iling only apply to certain territory (to	erritories) or certain classes? If so, spe	ecify:
Natio Insu	onal Casualty Company is advising your rance Services Office for our currently current with ISO's distribution date of	s rates of an advisory organization, spe our Department of our intent to adopt I of filed Commercial Property program. April 1, 2012.	SO Loss Cost revisions of the
* C	djusted to reflect all prior rate change hange in Company's premium level w sult from application of new rates.		
		N	National Casualty Company
			Name of Company
			Dawn Weirich - State Filing

## FORM (RF-3)

## **SUMMARY SHEET**

Change in Company's premium	or rate level	produced by	rate revision
effective 04/01/2012	•		•

-	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private	volume (minors)	<u>Onange (101)</u>
١.	Passenger		
	Commercial		
2	Automobile Physical Damag		
_	Private Passenger		•
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity	<u></u>	
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	2605	-2.7%
10.	Extended Coverage		2.770
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other	Market Association	
	Life of Insurance		
•			
	Does filing only apply to certa	in territory (territories) or	certain
	Classes? If so,		
	specify: No		
	Brief description of filing. (If fi	ling follows rates of an a	avisory
	Organization, specify	Me are adopting ISO s	afaranca numbar
	organization):	We are adopting ISO r	elerence number
	CF-2011-RLA1	<u> </u>	
	*Adjusted to reflect all prior ra	te changes	
	**Change in Company's prem		t from application of new
	rates.		
		North River Insurai	nce Company
		<del> </del>	

Name of Company Sharon D. Smith, Regulatory Compliance Analyst

	Change in Company's pre revision effective	emium or rate level produced by rate April 1, 2012	
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change ( + or -)**</u>
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	\$345,149	-2.7
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail	-	
15.	Other		
	Line of Insurance		
	s Filing only apply to certain territo ses? If so, specify:	ry (territories) or certain	
	f description of filing. (If filing follow	<b>Adoption of ISO's Commercial Fire</b>	and Allied Lines Advisory
		Prospective Loss Cost Revision	

- \* Adjusted to reflect all prior rate changes.
  \*\* Change in Company's premium level which will result from application of new rates.

Nova Casualty Company
Name of Company

Diane Legere - Vice President
Official - Title

	Change in Company's premium or rate	e level produced by rate revision effective	04/01/2012
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	660	- 2.7%
10.	Extended Coverage		2.7,0
11.	Inland Marine		-
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		Webst.
15.	Other		
	Line of Insurance	*** **********************************	
	filing only apply to certain territory (te Applicable	rritories) or certain classes? If so, specify:	
The	purpose of this filing is to adop	rates of an advisory organization, specify of the following Insurance Services C Revision Designation Number CF-20	Office, Inc. (ISO)
** C	djusted to reflect all prior rate changes hange in Company's premium level where esult from application of new rates.		

Pacific Employer Insurance

Company
Name of Company

Renice Cox, Associate Product Manager
Official - Title

Change in Company's premiurevision effective 4/1/2012		by rate
(1)	(2)	(3)
_	Annual Premium	Percent
<u>Coverage</u>	Volume (Illinois)*	Change (+ or -)**
1. Automobile Liability Private Passenger Commercial		·
2. Automobile Physical Damage Private Passenger		
Commercial		
3. Liability Other Than Auto 4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire	210266	-0.3% - Adopting Specifically
	210200	Rated Basic Group I Risks Onl
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Line of Insurance		
Does filing only apply to certain If so, specify: N/A	territory (territories)or	certain classes?
Brief description of filing. (If organization, specify organization)	n): We intend to adopt or rated risks portion or	nly the specifically of the ILLINOIS ALLIED LINES ADVISORY I REVISION FURNISHED in ISO Reference
* Adjusted to reflect all prior  ** Change in Company's premium le  result from application of new	vel which will rates. Republic-Franklin Insur	
Dia	Name of Compa	resident & Managing Actuary
	7 6 A	

	Change in Company's premium or rate	e level produced by rate revision effective	04-01-12
	(1) <u>Coverage</u>	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1.	Automobile Liability		
1.	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		-
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	23,000	-2.7%
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
	filing only apply to certain territory (te	rritories) or certain classes? If so, specify:	
No			
Brief	description of filing. (If filing follows	rates of an advisory organization, specify of	organization):
Sco	ttsdale Indemnity Company is advising	your Department of our intent to adopt ISC	) Loss Cost revisions of the
		filed Commercial Property program. We r	request an effective date
con	current with ISO's distribution date of A	April 1, 2012.	
	· · · · · · · · · · · · · · · · · · ·		
	Take M	***************************************	
* /	Adjusted to reflect all prior rate changes	•	
	Change in Company's premium level wh		
	esult from application of new rates.	AAWAA TYABA	
•	abbitanton or man image.		

Scottsdale Indemnity Company
Name of Company

Dawn Weirich - State Filing Analyst II

	Change in Company's pre revision effective	mium or rate level produced by rat April 1, 2012	е
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change ( + or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial	·	
3.	Liability Other Than Auto		
4. 5.	Burglary and Theft Glass		
5. 6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	\$1,330,428	-2.7%
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril	*****	
14.	Crop Hail		
15.	Other		
	Line of Insurance		
	s Filing only apply to certain territor ses? If so, specify:	y (territories) or certain	
	f description of filing. (If filing follow nization, specify organization):	vs rates of an advisory Adoption of ISO's Commercia	l Fire and Allied Lines
•		<b>Advisory Prospective Loss C</b>	osts Revision
	•		,
	* Adjusted to reflect all prior rate ch	nanges.	
*	* Change in Company's premium l		
	result from application of new rate		
	·		
			Seneca Insurance Company
			Name of Company

## FORM (RF-3)

# SUMMARY SHEET

Change in Company's premium or rai	te level produced by rate revision
effective_10/15/2011	

(1)	(2) Annual Premium	(3) Percent
Coverage	<ul> <li>Volume (Illinois) *</li> </ul>	Change (+or-) **
Automobile Liability Private		
Passenger	<u> </u>	·
Commercial		
Automobile Physical Damag		
Private Passenger		•
Commercial		
Liability Other Than Auto		
Burglary and Theft		
Glass		
Fidelity		
Surety		
Boiler and Machinery		
Fire	3248336	5.0
Extended Coverage		
Inland Marine		
Homeowners		
Commercial Multi-Peril		
Crop Hail		
Other		
Life of Insurance		
Does filing only apply to cert Classes? If so,	tain territory (territories) or	certain
specify: No		
specify.		
Brief description of filing. (If	filing follows rates of an a	dvison
Organization, specify	· · · · · · · · · · · · · · · · · · ·	a 1.00. y
organization):	Adopt ISO PMFs (ML-201	0-013) and revise our LCMs
,		
*Adjusted to reflect all prior r **Change in Company's pre- rates.	rate changes. mium level which will resu	It from application of new
iaico.	Sontry Incurance	\-Mutual Company
		me of Company
	ING	ine or company
•		Official Title

## FORM (RF-3)

## **SUMMARY SHEET**

Change in Company's premium or rate level produced by rate rev	/ision
effective 10/1/2011 .	

-	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private	- volume (minors)	Change (101-)
	Passenger		
	Commercial		
2	Automobile Physical Damag		
	Private Passenger		•
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
<b>6</b> .	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	1718080	1.0
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Life of Insurance		
•	Does filing only apply to certain Classes? If so, specify:  No	in territory (territories) or o	certain
	Print description of filing (If fi	ling follows rates of an ad	hioon
	Brief description of filing. (If fi Organization, specify	ing follows rates of an ac	ivisory
	organization):	Adopt ISO PMFs (ML-2010	-013) and revise LCMs
	organization).		
	*Adjusted to reflect all prior ra **Change in Company's prem rates.		from application of new
	1atc3.		

Sentry Select Insurance Company

Name of Company Sara Prondzinski - Compliance/Development Analyst

	revision effective	April 1, 2012	
	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	<u>Change ( + or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
١.	Burglary and Theft		
5.	Glass		
3.	Fidelity		
7.	Surety		
3.	Boiler and Machinery		
9.	Fire	\$7,298	-2.7%
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
4.	Crop Hail		
15.	Other		
	s Filing only apply to certain territor ses? If so, specify:	y (territories) or certain	
			-
	f description of filing. (If filing follow		A.J. 2
orga	inization, specify organization):	Commercial Fire and Allied Lines	s Advisory
		<b>Prospective Loss Cost Revision</b>	
	* Adjusted to reflect all prior rate cl		
*	* Change in Company's premium I		
	result from application of new rat	es.	
		SDADTA Inc.	
			rance Company f Company
		Name o	Сопрану
		Kevin Purce	II - VP IRC, LLC
		Offic	ial - Title

## FORM (RF-3)

## **SUMMARY SHEET**

Change in Company's premium or ra	te level produced by rate revision
effective 04/01/2012	•

<del>-</del>	(1)	(2) Annual Premium	(3) Percent
4	Coverage	Volume (Illinois) *	Change (+or-) **
1.	Automobile Liability Private		
	Passenger		
^	Commercial		
2	Automobile Physical Damag		•
	Private Passenger		
^	Commercial		
3.	Liability Other Than Auto		
4. -	Burglary and Theft		
5.	Glass		
<b>6</b> .	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	\$1,696,600	-2.7%
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Life of Insurance		
•	Does filing only apply to certa Classes? If so, specify:	ain territory (territories) or	certain
	Brief description of filing. (If f	iling follows rates of an ac	tvisory
	Organization, specify	ining rollows rates of arr at	1V13O1 y
	organization):	Adoption of ISO circular CI	F-2011-RLA1 with no modifications
	+ A 1' - A - A A		
	*Adjusted to reflect all prior ra **Change in Company's prem rates.		t from application of new
		Stonington Incuran	ce Company

Name of Company
Walter J Kozuch, Vice President - Technol Services

Form (RF-3)

# ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate le	vel produced by rate revision effective 6/1/20	12
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)</u> *	(3) Percent <u>Change (+ or -)**</u>
•	\$118,858  territories) or certain classes? If so, specify:	-2.70%
Brief description of filing. (If filing follows Adopt loss costs in CF-2011-RLA1  *Adjusted to reflect all prior rate changes	hich will result from application of new rates.  Tokio Marine & Nichido Fire I	nsurance Co., Ltd. (U.S. Branch) (TMNF) ame of Company

## FORM (RF-3)

## **SUMMARY SHEET**

Change in Company's premium or ra	te level produced by rate revision
effective 04/12/2012	

-	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois) *	Change (+or-) **
•	Automobile Liability Private		
	Passenger		
	Commercial		
	Automobile Physical Damag		•
	Private Passenger		
	Commercial		
	Liability Other Than Auto		
	Burglary and Theft		
	Glass		
	Fidelity	· · · · · · · · · · · · · · · · · · ·	
	Surety		
	Boiler and Machinery		
	Fire	5,731	-2.7%
).	Extended Coverage		
١.	Inland Marine		
2.	Homeowners		
3.	Commercial Multi-Peril		
1.	Crop Hail		
5.	Other		
	Life of Insurance		
•	Doos filing only apply to corta	in torriton, (torritorios) o	rcortain
	Does filing only apply to certain Classes? If so,	in territory (territories) of	Collain
	specify: No	·	
	specify.		
	Brief description of filing. (If fi Organization, specify	•	·
	organization):	ISO loss cost adoption	n.
	*Adjusted to reflect all prior re	to changes	
	*Adjusted to reflect all prior ra **Change in Company's prem rates.		ult from application of new
		Tower-Insurance-	Company-of-New-York
		·····	me of Company

Sheila Levine - Senior Business Analyst

## FORM (RF-3)

## **SUMMARY SHEET**

Change in Company's premium or ra	te level produced by rate revision
effective 04/12/2012	

(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
Automobile Liability Private		
Passenger		
Commercial		
Automobile Physical Damag		
Private Passenger		
Commercial		
Liability Other Than Auto		
Burglary and Theft		
Glass	<u></u>	
Fidelity		
Surety		
Boiler and Machinery		
Fire	830,872	-2.7%
Extended Coverage	000,0.2	
Inland Marine	**************************************	
Homeowners		
Commercial Multi-Peril		
Crop Hail		
Other		
Life of Insurance		
Does filing only apply to cert Classes? If so, specify: No	ain territory (territories) o	r certain
Brief description of filing. (If	filing follows rates of an	advisory
Organization, specify	iming follows rates of arri	20 1.001 j
organization):	ISO loss cost adoptio	<b>n.</b>
*Adjusted to reflect all prior in the state of the state	mium level which will resu	
		surance Company
	Na Na	ame of Company

Sheila Levine - Senior Business Analyst

Form (RF-3)

## **ILLINOIS DEPARTMENT OF INSURANCE**

## **SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision effective		January 1, 2012		
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>		
Automobile Liability Private				
Passenger Commercial  2. Automobile Physical Damage Private Passenger Commercial				
3. Liability Other Than Auto				
Burglary and Theft				
5. Glass				
6. Fidelity				
7. Surety				
8. Boiler and Machinery		100/ (5 11 1 1)		
9. Fire	\$1,981,503	+4.3% (Estimated)		
10. Extended Coverage				
<ul><li>11. Inland Marine</li><li>12. Homeowners</li></ul>				
13. Commercial Multi-Peril				
14. Crop Hail	-			
15. Other				
Line of Insurance				
Does filing only apply to certain territory	(territories) or certain classes? If so, specify	n. No		
Brief description of filing. (If filing follow Loss Cost Multipliers / Adjusting Age Factors for PC 9	vs rates of an advisory organization, speci of Building Factors for buildings over 30	fy organization): <u>Adjusting Earthquake</u> years old / Revising Protection Class		
*Adjusted to reflect all prior rate change **Change in Company's premium level v	which will result from application of new rate	ire & Casualty Company		
		Name of Company		
	Chris Manders,	Corporate Underwriting Analyst Official – Title		

## FORM (RF-3)

#### SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision				
effective <u>04/01/2012</u>	***************************************			
(1)	(2)	(3)		

(1)	(2) Annual Premium	(3) Percent
Coverage	Volume (Illinois) *	Change (+or-) **
Automobile Liability Private		
Passenger		
Commercial		
Automobile Physical Damag		
Private Passenger		
Commercial		
Liability Other Than Auto		
Burglary and Theft		
Glass		
Fidelity		
Surety		
Boiler and Machinery		
Fire	565,218	-2.7%
Extended Coverage		
Inland Marine		
Homeowners		
Commercial Multi-Peril		
Crop Hail		
Other		
Life of Insurance		
Does filing only apply to certa	in territory (territories) o	r certain
Classes? If so,		
specify: No		
Brief description of filing. (If f	ling follows rates of an a	advisory
Organization, specify		
organization):	We are adopting ISO	reference number
CF-2011-RLA1		
*Adjusted to reflect all prior re	to obongos	
*Adjusted to reflect all prior ra		ult from application of now
**Change in Company's prem	iium ievei wilich will fest	at nom application of new
rates.		

-United-States-Fire-Insurance-Company-Name of Company

Sharon D. Smith, Regulatory Compliance Analyst

Change in Company's	premium	or	rate	level	produced	by	rate
revision effective	4/1/2012					•	

revision effective 4/1/2012		•
(1)	(2) Annual Premium	(3) Percent
Coverage	Volume (Illinois)*	Change (+ or -)**
1. Automobile Liability Private Passenger		
Commercial		
2. Automobile Physical Damage Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		0.004 11 11 0 15 11
9. Fire	371378	-0.3% - Adopting Specifically- Rated Basic Group I Risks Only
10. Extended Coverage		Rated Basic Group I Risks Offig
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		
Does filing only apply to certain If so, specify: N/A	territory (territories)or	c certain classes?
Brief description of filing. (If organization, specify organization	<ul> <li>We intend to adopt or rated risks portion</li> </ul>	nly the specifically of the ILLINOIS ALLIED LINES ADVISORY T REVISION FURNISHED in ISO Reference
* Adjusted to reflect all prior r ** Change in Company's premium lev result from application of new	vel which will	
•	Utica Mutual Insuranc	re Company
	Name of Compa	
	A.	
	- Haysiernan	
	- Assistant Vice Proof	resident & Managing Actuary

H29219D